PROFILE OF NATIVE AMERICAN BUSINESS OWNERS

The Alabama Indian Affairs Commission (AIAC) has learned you are a Native American owned/operated small business OR farm/agribusiness. In an effort to improve and enhance business opportunities for your enterprise and others, please provide the following information and return this form to the address below or submit this form electronically.

Name of Business:					
Mailing Address (Street):					
City:	Stat	te: 7	ip Code:	County:	
Web Site/Email Address:					
Business Phone (including Area	Code):			Fax Number:	
Contact Person:			Vu.		
	me		Title	Phone Number	(include area code)
Tribal Affiliation:	ust include a copy o	J. War			
Date Business Established: Type of Ownership: Corporat			dual () Other	r (specify) ()	
Type of Business/Farm:	06		alle		
Number of E	mployees:	1 80	Acreag	ge:	
Licensed in Alabama? Yes (No ()	If yes, dat	te of license:		
Business Bondable? Yes () No ()	If yes, list	amount:		
Annual Gross Sales:					
Signature of Business Owner/CE	0:			Date:	

RETURN THIS FORM TO:

ALABAMA INDIAN AFFAIRS COMMISSION 771 SOUTH LAWRENCE STREET, STE 106 MONTGOMERY, AL 36104

PHONE: (334) 240-0998 FAX: (334) 240-3408

Email: aiac@att.net
Web site: www.aiac.alabama.gov